

**REVOCATION OF POWER OF  
ATTORNEY WITH  
NEW POWER OF ATTORNEY  
AND  
CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	10/621,414
Filing Date	July 18, 2003
First Named Inventor	Avinash Chidambaram
Title	GRAPHICAL INTERFACE FOR CONFIGURING A POWER SUPPLY CONTROLLER
Examiner Name	Steven B. Theriault
Attorney Docket Number	5510P152

**I hereby revoke all previous powers of attorney given in the above-identified application.**

☐ A Power of Attorney is submitted herewith

**OR**

☒ I hereby appoint the practitioners associated with the Customer Number:

**08791**

☒ Please change the correspondence address for the above-identified application to:

☒ The address associated with Customer Number:

**08791**

**OR**

☐ Firm or  
Individual  
Name

Address

City

State

Zip

Country

Telephone

Email

I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 C.F.R. 3.71.  
*Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)*

**SIGNATURE of Applicant or Assignee of Record**

Signature

Name

**Clifford J. Walker**

Date

**3-31-10**

Telephone

**408-414-9608**

Title & Company: **VP Corporate Development, Power Integrations, Inc.**

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required. See below\*.

☒ \*Total of 1 forms are submitted

**SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.**